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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

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NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	AIL CENTER
ADDRESS (number and street)	5,8,4,0,L0,RA	<u> </u>		
Check if different than previously reported. (ACC)	[C, L, A, R, K, S, D, N,			19.61-
2. FEC IDENTIFICATION NU	3. IS 1		STATE A AMENDED (A)	ZIP CODE A
4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Counterly Report (Counterly Report (Counterly Report (Counterly Report (Counterly Report (Non-election Year Only) (MY) Termination Report (TER) 5. Covering Period	PRE-Election Report for the: (d) 30-Day	D (M3) Jun 20 (M6) D (M4) Jul 20 (M7) D Primary (12P) Convention (12C) On General (30G)	Sep 20 (M9) Oct 20 (M10) General (12G) Special (12S) Runoff (30R)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) Runoff (12R) in the State of Special (30S) in the State of
I certify that I have examined the Type or Print Name of Treasure Signature of Treasurer NOTE: Submission of false, error Office Use Only	John C.	y knowledge and belief it is tr	Date 0.0 / 1.0 this Report to the penalt	1 20,12